

DEVELOPMENTAL/SENSORY/OTHER DISABILITIES

INTERFERING WITH EATING

(362)

PARTICIPANT TYPE.....	ALL
HIGH RISK.....	YES

RISK DESCRIPTION:

Developmental, sensory or motor disabilities that restrict the ability to intake, chew or swallow food or that require tube feeding to meet nutritional needs. Disabilities include but are not limited to:

- Minimal brain function
- Feeding problems due to a developmental disability such as pervasive development disorder (PDD) which includes autism
- Birth injury
- Head trauma
- Brain damage
- Other disabilities

ASK ABOUT:

- All Participant Categories:
 - Attitude and knowledge about condition and treatment plans including diet and medications
 - Barriers to following treatment plan (e.g., health beliefs, religious or cultural practices, finances, access to follow-up health care)
 - Weight history and weight goal
 - Food-medication interactions
 - Supplements including vitamins, minerals, herbal products, targeted nutrition therapy products
 - Typical intake with attention paid to potential nutrient deficiencies
 - Acceptable food textures and food avoidances
 - Bowel and bladder function
 - Physical ability to self-feed

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ASK ABOUT (CON'T):

- Children with Pervasive Development Disorder:
 - Selective eating habits that go beyond the usual “picky eating” behavior and that become increasingly selective over time (i.e., foods they used to eat will be refused)
 - Difficulty with transition to textures
 - Increased sensory sensitivity (restricted intake due to color, texture and/or temperature of foods)
 - Variety of accepted foods
 - Difficulty accepting new foods
 - Difficulty with administering multivitamin/mineral supplementation
 - Difficulty with changes in mealtime environment

NUTRITION COUNSELING/EDUCATION TOPICS:

- Identify the WIC foods that are consistent with the treatment plan.
- Determine and discuss an eating pattern appropriate for the participant’s weight goal (i.e., maintain, gain or lose weight).
- Review and provide WIC-approved medical foods or formulas as prescribed by the primary care provider.

POSSIBLE REFERRALS:

- If the participant has significant unresolved feeding difficulties, refer to a feeding clinic.
- If the participant is taking any non-prescribed vitamin or mineral supplements, herbal supplements, or targeted nutrition therapy products, advise discussing these with the primary care provider.
- If the participant does not have an ongoing source of health care, refer to primary care providers in the community or local public health department.
- Refer infants and children to Children’s Special Health Services program (<http://www.ndhealth.gov/cshs/>) to see if their specific condition is covered.
- Refer infants and children to the Right Track Program for early intervention services (<http://www.nd.gov/dhs/services/disabilities/earlyintervention/parent-info/right-track.html>) especially if they have any of the following conditions:
 - Traumatic brain injury
 - Seizure disorders
 - Birth injuries
 - Physical impairments from birth or accident
 - Serious attachment disorders
 - Pervasive development disorder or other autism spectrum disorders